ABSTRACT:

Introduction: Teleprimary Care-Oral Health Clinical Information System (TPC-OHCIS) is an updated electronic medical record (EMR) used in public primary healthcare. The system is expected to reduce job demands in healthcare settings, which work as a work support tool in organizational resources. Thus, we aim to compare job satisfaction levels among healthcare providers between primary care with and without TPC-OHCIS. Secondly, to test the hypothesis of TPC-OHCIS as a moderator between perceived exposure to psychosocial factors-job satisfaction relationship.

Methods: The study was a quasi-experimental design conducted among healthcare providers in 14 public primary healthcare facilities in the Seremban district of Malaysia from June to July 2021. The ratio of respondents between the intervention and control groups is almost 1:1. Psychosocial risk factors were assessed using the medium version of the Copenhagen Psychosocial Questionnaire (COPSOQ), consisting of 17 variables. All data were analyzed using the IBM Statistical Package for Social Sciences (SPSS) version 21. The hierarchical regression analysis was applied to examine the moderation effects of TPC-OHCIS and the psychosocial factors-job satisfaction relationship. All independent, moderator and control variables were Z-standardization prior to regression analysis. The interaction terms were created between each independent variable and the moderator. We plotted all significant interactions at "high" and "low" values of the predictor and moderator and assessed the significance of the slope.

Results: A total of 303 healthcare providers consented to participate in this study. The respondents were distributed almost equally into two groups, 147 (48.5%) respondents from the primary healthcare with TPC-OHCIS and 156 (51.5%) respondents from the primary healthcare without TPC-OHCIS. This study showed that only two out of 17 variables of psychosocial factors had significant differences due to the implementation of TPC-OHCIS. The results indicated that work pace was substantially higher in primary healthcare with TPC-OHCIS with a mean score of 69.64 vs 63.70 (p<0.005), and influence at work was significantly lower in primary healthcare with TPC-OHCIS with a mean score of 47.49 vs 52.33 (p<0.05). Moderation analysis demonstrated that TPC-OHCIS moderated the meaning of work-job satisfaction relationship ($\beta=1.877$, SE=0.771, $p<0.05$), job insecurity-job satisfaction relationship ($\beta=2.713$, SE=0.873, $p<0.005$) and quality of work-job satisfaction ($\beta=2.190$, SE=0.791, $p<0.005$).

Discussion: This study highlights the role of TPC-OHCIS as a moderator in improving healthcare providers' conditions in workplaces. The effect of three psychosocial factors, the meaning of work, job insecurity and quality of work, on job satisfaction, as shown in this study, depends on whether the healthcare providers work in primary care with or without TPC-OHCIS.

KEYWORDS: Psychosocial factors, job satisfaction, EMR, TPC-OHCIS